

County: Polk
L. O. SIMENSTAD NURSING UNIT
301 RIVER STREET, BOX 218
OSCEOLA 54020 Phone: (715) 294-2111

Facility ID: 5000

Page 1

Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? Yes
Number of Beds Set Up and Staffed (12/31/01): 40
Total Licensed Bed Capacity (12/31/01): 40
Number of Residents on 12/31/01: 37

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 38

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		32.4	
Home Health Care	No					1 - 4 Years		43.2	
Supp. Home Care-Personal Care	No					More Than 4 Years		24.3	
Supp. Home Care-Household Services	No	Developmental Disabilities	2.7	Under 65	5.4				
Day Services	No	Mental Illness (Org./Psy)	48.6	65 - 74	13.5				
Respite Care	No	Mental Illness (Other)	2.7	75 - 84	27.0			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	40.5	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	13.5	Full-Time Equivalent			
Congregate Meals	No	Cancer	5.4			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	8.1	65 & Over	94.6				
Transportation	No	Cerebrovascular	13.5			RNs		17.1	
Referral Service	No	Diabetes	2.7	Sex	%	LPNs		7.7	
Other Services	No	Respiratory	0.0			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	16.2	Male	21.6	Aides, & Orderlies			
Mentally Ill	No			Female	78.4				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	23	95.8	119	0	0.0	0	12	92.3	115	0	0.0	0	0	0.0	35	94.6
Intermediate	---	---	---	1	4.2	97	0	0.0	0	1	7.7	99	0	0.0	0	0	0.0	2	5.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		24	100.0		0	0.0		13	100.0		0	0.0		0	0.0	37	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	13.6	Daily Living (ADL)	Independent			
Private Home/With Home Health	4.5	Bathing	0.0	78.4	21.6	37
Other Nursing Homes	13.6	Dressing	2.7	78.4	18.9	37
Acute Care Hospitals	54.5	Transferring	24.3	62.2	13.5	37
Psych. Hosp.-MR/DD Facilities	4.5	Toilet Use	10.8	64.9	24.3	37
Rehabilitation Hospitals	4.5	Eating	24.3	59.5	16.2	37
Other Locations	4.5	*****				
Total Number of Admissions	22	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		21.6
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	70.3	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	20.0	Occ/Freq. Incontinent of Bowel	24.3	Receiving Suctioning		0.0
Other Nursing Homes	12.0			Receiving Ostomy Care		5.4
Acute Care Hospitals	8.0	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	2.7	Receiving Mechanically Altered Diets		32.4
Rehabilitation Hospitals	0.0					
Other Locations	4.0	Skin Care		Other Resident Characteristics		
Deaths	56.0	With Pressure Sores	5.4	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	18.9	Medications		
(Including Deaths)	25			Receiving Psychoactive Drugs		64.9

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.0	88.1	1.08	84.6	1.12
Current Residents from In-County	59.5	83.9	0.71	77.0	0.77
Admissions from In-County, Still Residing	40.9	14.8	2.76	20.8	1.97
Admissions/Average Daily Census	57.9	202.6	0.29	128.9	0.45
Discharges/Average Daily Census	65.8	203.2	0.32	130.0	0.51
Discharges To Private Residence/Average Daily Census	13.2	106.2	0.12	52.8	0.25
Residents Receiving Skilled Care	94.6	92.9	1.02	85.3	1.11
Residents Aged 65 and Older	94.6	91.2	1.04	87.5	1.08
Title 19 (Medicaid) Funded Residents	64.9	66.3	0.98	68.7	0.94
Private Pay Funded Residents	35.1	22.9	1.53	22.0	1.60
Developmentally Disabled Residents	2.7	1.6	1.73	7.6	0.36
Mentally Ill Residents	51.4	31.3	1.64	33.8	1.52
General Medical Service Residents	16.2	20.4	0.79	19.4	0.84
Impaired ADL (Mean)*	54.1	49.9	1.08	49.3	1.10
Psychological Problems	64.9	53.6	1.21	51.9	1.25
Nursing Care Required (Mean)*	10.5	7.9	1.32	7.3	1.43